



**Maine Department of the Secretary of State  
Maine's Civil War History for Schools Program  
Presentation Registration Form**

<b>School Name:</b>
<b>Primary Contact Name(s):</b>
<b>Address:</b> <b>Phone:</b> <b>E-Mail Address:</b>
<b>Presentation Date Requested (Please provide two possible dates) and time presentation would begin:</b>
<b>Grade-level &amp; group size:</b>
<b>Length of Time Available for Presentation:</b>
<b>Specific issues that the State Archivist should cover:</b>